

SAYRE (L.A.) M. Shuman
PRESIDENTIAL ADDRESS
with kindest regards
BEFORE THE *Lewis A. Sayre*

AMERICAN MEDICAL ASSOCIATION,

Recd Sept 30th 1880.
AT ITS

THIRTY-FIRST ANNUAL SESSION,

NEW YORK CITY, JUNE 1, 1880.

BY

LEWIS A. SAYRE, M.D.



EXTRACTED FROM THE
TRANSACTIONS OF THE AMERICAN MEDICAL ASSOCIATION.

PHILADELPHIA:
COLLINS, PRINTER, 705 JAYNE STREET.
1880.

120

1871-1872

PRESIDENTIAL ADDRESS

BEFORE THE

AMERICAN MEDICAL ASSOCIATION,

AT ITS

THIRTY-FIRST ANNUAL SESSION,

NEW YORK CITY, JUNE 1, 1880.

BY

LEWIS A. SAYRE, M.D.

EXTRACTED FROM THE

TRANSACTIONS OF THE AMERICAN MEDICAL ASSOCIATION.



PHILADELPHIA:
COLLINS, PRINTER, 705 JAYNE STREET.
1880.

ADDRESS.

GENTLEMEN OF THE AMERICAN MEDICAL ASSOCIATION:—

BEFORE entering upon the duties of the high office to which you have elected me, I wish to return you my sincere thanks for the distinguished honor thus conferred, and to pledge you that I will endeavor to discharge its duties to the best of my ability.

No one can feel more keenly than I do my own incapacity properly to fill the distinguished position to which you have elected me, or more sincerely regret that some other, more competent and more worthy of the honor, had not been elected in my place. But as your too partial personal friendship has thus elevated me to this post, I must appeal to your generosity to overlook any of my shortcomings, and rely upon your mutual aid to assist me in the discharge of the important duties thus imposed.

Who can properly appreciate the value of this Association, or the immense advantage it has already been to the medical profession throughout our whole country? Contemplate for a moment the difference in the *morale*, the devotion to scientific investigation, the mutual respect and good feeling between its members at the present time, and the condition when this Association was organized. At that time there were often envyings, jealousies, and heart-burning, fault-finding, and traduction; those who had achieved distinction were frequently slandered and abused by those who had not been so fortunate; the slightest imperfection of a professional brother was magnified into such undue proportions as completely to obscure any really good qualities or attainments that he might actually possess; and thus the whole profession was injured in the estimation of the public by the rivalries, bickerings, and jealousies that existed among its members. Now, each one seems so engaged in endeavoring to improve himself and elevate his own position in

the profession, that he has no time to devote to studying his neighbor's faults, much less to accurately scrutinize and publicly herald his seeming defects.

The science of medicine has been so much enlarged in all its different departments by the minute researches now demanded, and by the great advance and rapid progress of many of its specialties, as to require that every moment of a man's time be occupied in the closest study if he would keep himself abreast with the daily improvements in our profession. And he who is thus occupied has no time to study the defects of others. By this constant struggle to improve ourselves and advance our science, the whole profession becomes more elevated in tone; and we already see that physicians are becoming more and more respected by the community at large.

Let us contemplate for a few moments what has been done by the profession in America for the improvement of medical and surgical science, and the relief of suffering humanity. Some years ago, Sydney Smith, one of England's most popular authors, said in the *Edinburgh Review*: "The Americans are a brave, industrious, and acute people, but they have hitherto made no approaches to the heroic, either in their morality or their character. During the thirty or forty years of their independence they have done absolutely nothing for the sciences, for the arts, for literature, or even for the statesmanlike studies of politics and political economy. . . . In the four quarters of the globe, who reads an American book, or goes to an American play, or looks upon an American picture or statue? What does the world yet owe to American physicians or surgeons? What new substances have their chemists discovered, or what old ones have they analyzed? What new constellations have been discovered by the telescopes of Americans? What have they done in mathematics? Who drinks out of American glasses, or eats out of American plates, or wears American coats or gowns, or sleeps in American blankets?"

It would seem to me that the very Declaration of Independence, and the willingness to sacrifice their lives to obtain it, was an act of heroism equal to any recorded in history. And the organization of the Government under constitutional law, which has yielded such results as were never before obtained, is an evidence of statesmanship and of knowledge in political economy which has been seldom equalled, and never surpassed.

As to the questions of American manufactures and the nations that use them, we can safely refer to the reports of our Chamber of Commerce for a satisfactory answer. American science has no need to be ashamed of its Henry and its Morse, its Bache, Peirce, Newcomb, Draper, Marsh, Dana, Gray, Hall, and its adopted Agassiz. Nor has the American Journal of Science anything to fear by comparison with its European contemporaries.

But to the question, "What does the world yet owe to American physicians and surgeons?" we would venture a more full reply, although time will not permit us to revert to more than a few of our professional achievements.

First among the greatest boons ever conferred upon suffering humanity stands "anæsthesia," an American suggestion, and one that immortalizes the name of Morton. Who can ever estimate the value of this discovery, or who can accurately describe the contrast between the former agony necessarily endured in many surgical operations, and the present absolute oblivion of all pain, the happy, tranquil, undisturbed sleep while the flesh quivers under the knife? When we contemplate the millions of human beings on the earth, and consider the fact that at every moment of time, in some part of the civilized world, hundreds, if not thousands, are receiving the benefits of this great discovery, the mind becomes overawed at the magnitude of the blessing, and even imagination fails to comprehend fully its benefits.

Ovariectomy, another American contribution to the medical profession, has done probably as much toward saving life as any other surgical discovery in the nineteenth century. It was first practised, in 1809, on Mrs. Crawford, in Danville, Kentucky, by Dr. Ephraim McDowell. Although honestly and modestly reported, eight years afterward, in the *Philadelphia Eclectic Repertory and Analytical Review*, it still made no impression on the professional mind, but was received rather with derision and scorn until Dr. Atlee, in 1844, revived the operation, and by persevering effort, in spite of all opposition and the very general condemnation of his contemporaries, was enabled at last by his numerous brilliant successes to establish the operation on a permanent basis. At the present time it is acknowledged as the proper operation to perform, in certain cases, by every medical school in the civilized world. Dr. Peaslee says

that "in the United States and Great Britain alone, ovariectomy has, within the last thirty years, directly contributed more than thirty thousand years of active life to woman, all of which would have been lost, had ovariectomy never been performed."

In Gynæcology, the whole professional world cheerfully and gratefully acknowledges the original and invaluable contributions of Sims, Thomas, Emmet, Peaslee, Atlee, Kimball, Taylor, Pallen, Dunlap, Minor, and others in this department.

The new operation of Litholapaxy, which consists in the prompt and entire fragmentation of calculous material in the bladder, and the entire removal of the debris by aspiration through a tube passed by the urethra at a single sitting, first performed and described by Dr. Bigelow of Boston, is one of the grandest triumphs of modern surgery, and of which any American surgeon may well feel justly proud.

In conservative Surgery, we certainly compare most favorably with any other nation. In the mechanical treatment of diseases of the joints, by which means the patients are able to take free exercise in the open air during the whole progress of the disease, thus acquiring power to overcome the constitutional dyscrasia better than by any means heretofore employed, and, when the disease has progressed beyond repair, then to perform the sub-periosteal exsection of the joint in such a manner as to leave the muscular attachments in their normal position, and by judicious after-treatment to restore them with but slight deformity and almost perfect power of motion,—these certainly are triumphs in surgery, of which the American profession may well be proud.

In the *Lancet*, of February 14, 1880, Roderick Maclaren, M.D., Surgeon to the Cumberland Infirmary, in his Presidential address to one of the branches of the British Medical Association, on "The Advances of Surgery during the past twenty years," says: "No account of the recent progress in Surgery can justly omit the application of the principles of absolute rest to diseases of the vertebræ. It is done by inclosing the body in a plaster-of-Paris jacket. Though only introduced into this country about two years ago, it has established itself as an *incontrovertible success*." This is another triumph for American Surgery, and is justly admitted not only in England, but in all parts of the civilized world.

When we contemplate the misery and suffering of the un-

fortunate "hump-back," who, after years of torturing treatment, has for its termination only deformity or death; or, the patient with a bad lateral curvature, who, in addition to deformity, has for years suffered constant agony from the application of the cruel instruments of torture, intended for his relief but never successful, and compare his condition with that resulting from the present mode of treatment, which is void of all danger, perfectly painless in its application, allowing the freest exercise and enjoyment during its progress, always affording immediate relief even in cases that have passed beyond the hope of cure,—and in the majority of cases, when the treatment has been commenced at a proper time and judiciously carried out, terminating in a perfect result—frequently leaving no trace of deformity as an evidence of its previous existence,—we feel that American Surgery has a right to congratulate herself that she has contributed this great boon for the relief of human suffering.

In Laryngology, we can certainly claim Green as a pioneer, and we all know the censure he received, and the opposition he encountered: but the facts he then established are now acknowledged by the entire scientific world—and the improvements made in this department of Surgery by Cohen, Cutter, Bosworth, Elsberg, Lincoln, Lefferts, Robinson, and many others in this country, entitle us to rank with other nations.

Time will not permit us to refer to all our contributions in the different departments of medical and surgical science; but I have enumerated enough to justify the belief that if the distinguished author before referred to was now to write, he would express very different sentiments from those above quoted. Not content, however, with what we have already achieved, let us still press onward, and, accepting the motto of our great State, constantly cry "Excelsior."

METRIC SYSTEM.

It is the duty of this Association carefully to investigate every claim to improvement or advance in medical and surgical science; and, if such claim is found to be worthy of confidence, to lend such innovation or improvement the moral influence of its support.

One of these innovations is the substitution of the "Metric System of Weights and Measures" for our present uncertain

“formula.” As medical science is not sectional, or even national, but universal, we certainly should adopt some nomenclature and modes of expression for weight, measure, and form, that would be the same in all languages, and among all nations of the civilized world. This is what the metric system proposes, and it seems to me that this Association should immediately recommend its adoption.

At the meeting of this Association in Buffalo, June 5, 1878, the following resolution was passed by the Section on Practice of Medicine, Materia Medica, and Physiology:—

“*Resolved*, That this Section, recognizing the value of the metric system for its uniform, international, indestructible, generally applicable, convenient, simple, safe, and scientific character, hereby recommends to all physicians the use of the same in their practice, and in their writings and teachings.”

The passage of a resolution, even by unanimous vote, does not always imply that those who have favored it will take active measures to have it carried out in practice. There are few, if any, who make themselves practically familiar with the metric system without perceiving its great superiority to all other systems of weights and measures already in use. But no system, however perfect in theory, can become practically of much value until it has become so well known to the public that little or no special instruction is needed by those who are intrusted with its application. The present objectionable methods of dispensing medicine have the great advantage of prestige of habit. To overthrow this, and to secure for the metric system the mere opportunity to become generally known, will require persistent effort on the part of its friends, aside from such concert of action as may be implied in the passage of resolutions.

To enter into a detailed discussion of the advantages to be gained by using the metric system, and of the difficulties to be overcome in discarding the old, would necessitate a separate paper, rather than a mere section of an address. It will be possible only to indicate very briefly some of the salient points that mark the new system, and to show what has been its success already when imposed by authority in hospital service. At the outset it may be observed that physicians are not put to the necessity of learning the entire terminology of the metric system, simple as this may be. The only unit of volume to be

remembered is the *cubic centimetre*, occupying the space of a gaming die, or of a cube whose edge is about four-tenths of an inch. The only unit of weight is a *gram*, which is the weight of one cubic centimetre of pure water at its heaviest. Its English equivalent is a little over fifteen grains. It may be interesting to trace the relation of these units to others in use among physicists; to know, for example, that the length of the centimetre is a hundredth part of a *metre*, which in turn is the forty millionth part of the earth's circumference; but practically there is little or no necessity for the measurement of length or surface in the dispensing of medicine. The various prefixes, of Latin and Greek origin, which are regarded by many as too learned in sound to be accepted in place of the more familiar, but less simple, English denominations now in use, will give no trouble to the physician, because he has no need to use them.

No one objects to either the name or the use of dollars and cents; and no one on this side of the Atlantic would be willing to give up our decimal mode of counting money for that of pounds, shillings, pence, and farthings, in which reduction from one denomination to another is a perpetual source of annoyance. By the simple change in position of a decimal point we are able, without the change of a single figure, to express the fortune of a millionaire in fractions of a cent. No one experiences any difficulty in forming an estimate, clearly and promptly, of the value expressed by a given number of dollars and decimals of a dollar; nor does any one think of reading the amount as so many eagles, dollars, dimes, cents, mills, and tenths of a mill. Though these denominations are given in the books, we have practically discarded all except dollars and cents, because these two are found sufficient for most purposes. In like manner, most of the denominations of the metric system will not be employed, because they are not wanted, and because the numerical relation between the few which remain in use is so very simple, and easily remembered.

The reasoning which has been applied to the dollar in contrast with the British pound sterling, is equally applicable to the gram in contrast with the British ounce avoirdupois or ounce apothecaries'. A pound avoirdupois is made up of sixteen ounces, each of which weighs four hundred and thirty-seven and a half grains, making seven thousand grains in all. A pound apothecaries' is made up of twelve ounces, each of which

weighs four hundred and eighty grains, making five thousand seven hundred and sixty grains in all. The confusion resulting from this inconsistent use of the same name for things of different value is interminable and unnecessary. Let the use of the pound and ounce be replaced by that of the *gram*, which is perfectly definite in value. In pharmacy it is neither difficult nor confusing to express any given weight in grams and decimals of a gram, any given volume in cubic centimetres and decimals of the same. By the use of a vertical line near the right edge of the prescription paper, like that placed in an account book to separate dollars from cents, the danger of making mistakes is far less than where the arbitrary symbols of apothecaries' weight are employed. To express ounces in scruples, or drams in grains, a mental calculation is necessary, not very difficult, it is true, but still implying just so much liability to error, and a loss of time, which may be avoided by the use of the decimal notation.

For those who have not familiarized themselves with metric units, and who know what doses should be given when these are expressed in grains or fluidrachms, but would be at a loss to express the same in grams or cubic centimetres, tables of equivalents have already been printed and can easily be obtained. They have been in use for two years past in the U. S. Marine Hospital Service at Washington, where the employment of the metric system was made obligatory in the spring of 1878, by order of the Surgeon General. To this department, application was made a few weeks since, for information as to the success of the experiment, the object had in view being to place before this Association actual results rather than theoretic arguments. To the Surgeon General, Dr. John B. Hamilton, the following questions were put:—

I. Was any serious difficulty encountered by dispensing clerks in laying aside the old system and substituting the new?

II. Have mistakes in dispensing occurred with any noticeable degree of frequency in consequence of lack of skill in the management of decimal points?

III. Has any serious loss of time, or of accuracy, resulted from substitution of gravimetric for volumetric methods of dispensing liquid medicines?

IV. In case volumetric methods have been retained, have mistakes or difficulties arisen from the necessity of carrying in mind the specific gravities of the liquids measured, and allowing therefor?

V. Is there any apparent disposition on the part of dispensing clerks, or nurses, to return to the old system?

VI. Have you any suggestions to offer, based on the practical trial already given in the U. S. Marine Hospital whereby the adoption of the metric system by members of the American Medical Association, and by druggists in the country at large, may be facilitated?

The reply of the Surgeon General is so pointed, clear, and satisfactory, that no better service can be done in the cause of metric reform than by incorporating it, as a whole, in this address.

DEAR SIR:—

Referring to your letter of the 3d inst., I have to say in answer to the questions submitted:—

I. No serious difficulty has attended the adoption and exclusive use of the French decimal metric system in this service.

II. No mistakes have occurred on account of the change, so far as known to this office.

III. & IV.—Volumetric methods were retained, and as liquids have always been measured in the dispensing of medicines in this country, less inconvenience and trouble must necessarily attend the adoption of the metric system referred to if measures be retained than if gravimetric methods be exclusively employed, since the latter course would render it necessary to carry in mind the specific gravities of many liquids, and to make allowances accordingly in converting the terms of the old system into those of the new.

V. The discipline in the Marine Hospital service would prevent any opposition on the part of dispensing clerks or nurses.

VI. The suggestions I would make, based upon the experience in this service, are the following:—

In order to facilitate the general adoption of the new metric system in medicine and pharmacy, volumetric methods should be retained. On the one hand, this would save much labor, which would otherwise have to be done by prescription writers, and, on the other hand, it is fair to presume that whether liquids be prescribed in grams or in cubic centimetres, they will be dispensed quite generally by measure. The principal merit of the new system lies in the fact that, with nearly all liquids except syrups, glycerine, chloroform, and ether, the gram and the cubic centimetre will represent the same quantity practically.

The terms used to designate the units of the metric system should be anglicized as far as practicable, and the units reduced to the smallest number requisite. Prominence should be given to the "gram" and the "cubic centimetre," as being the only units with which it is necessary to be familiar. After the gram the *centigram* is the unit most applicable in medical and pharmacal gravimetry, and multiples and subdivisions of these two weight units are sufficient in my opinion. All the other prefixes used in the French system should be avoided in adopting that system for physicians and pharmacists, the "*centi*" alone being retained. The cubic centimetre seems to me to be a more suitable unit for use in medical formulæ than any subdivision of the litre.

In conclusion, it would be well if all friends of the metric system could agree to drop the fractions in the numbers which express the equivalents of the gram and the cubic centimetre in troy grains and minims, and to adopt the exceedingly simple rules for converting terms of the old system into those of the new, and *vice versa*, that have been found so useful in the practical trial given the decimal metric system in the Marine Hospital Service, the medical officers of which are now prescribing in metric terms for over twenty thousand patients annually. These rules were adopted simply as an aid in learning metric posology, and their usefulness ceases as soon as the prescriber is familiar with the expressions in metric terms of the doses of medicines, and they are probably not now used to any extent by the officers of this service.

I am, sir, very respectfully,

JOHN B. HAMILTON,
Surgeon-General, M. H. S.

PUBLICATION OF TRANSACTIONS.

For many years past there has been an almost annual complaint about the publishing of our Transactions. Sometimes it would be that publication had cost altogether too much money; at other times that they were not issued with sufficient promptness, and the volume when received was almost useless, since all the important papers or discussions in it had already appeared months before in the various medical journals of the country.

Upon considering carefully these objections, which have been increasing every year, it would really appear as if there were some just ground of complaint. And, since the matter is one of very grave importance, I would respectfully suggest that the Association give it very serious consideration, and, if deemed advisable, refer the subject to some proper committee, to report whether any plan can be suggested to bring the proceedings of the Association before the profession that would be better than the one now pursued. Certainly our present plan, besides being very expensive, does not give entire satisfaction; and it is very questionable whether the mode pursued by the British Medical Association, in establishing their own journal, would not be an immense improvement on our present method. The British Journal is the exclusive property of the Association; and by the liberal compensation of an accomplished editor, a weekly edition is issued, instead of an annual volume. Certainly this plan implies great economy; for, instead of being an expensive burden, as at present, the work of publication would in a very short time be a source of direct emolument.

The similarity of the two Associations in many respects, both in their organization and in their objects, is so great that we may possibly learn something to our advantage by carefully studying the history of the older association, and profit by her experience, and, if necessary, by her example. The importance of the subject must be my excuse for bringing to your attention many details which might possibly be regarded as superfluous.

Any one who has attended the meetings of the British Medical Association, and who is acquainted with its journal for the last ten years, may have observed that the extraordinary growth of that Association in power, wealth, influence in the profession, and influence in the State has been coincident with the development of a weekly organ of communication between the members,

the property of the Association, the Journal of the Association, and edited by a member of the profession appointed for the purpose by the council of the Association. This history, as told by these gentlemen, and as any one can confirm for himself by examining the facts, is extremely instructive in establishing at least one solid base for prosperity for any similar institution such as the American Medical Association. Briefly to summarize the facts, it may be stated that the British Medical Association was founded forty-six years ago by Sir Charles Hastings, a country physician, mainly for the purpose of advancing the professional interests of country physicians. Its growth was rapid, and in time it became British rather than provincial. The greatest men in England became annual presidents; its meetings were held in London, Edinburgh, and Oxford, and as a body it was highly respected. It soon appeared, however, that there was a comparatively narrow limit to its powers of extension. At each meeting considerable accessions of new members joined, but they soon fell off again. Then it was found necessary to convert the annual volume of Transactions into a weekly journal. It was noted that the *Provincial Transactions*, admirable as they were, formed a volume which did not appear for some months after the annual meeting; that such a volume was put upon the shelves and occasionally referred to, but rarely read through; that it did not appear until the interest of the meeting had faded away and until a good deal of the freshness had been taken off the papers by short abstracts and piecemeal reports, and that on the whole it was impossible to expect the Association to spread unless means were provided for more constant intercommunication between the members, and for the more rapid publication of their contributions to medical science and the more continuous discussion between the members of subjects of medical, social, and ethical interest in the intervals between the meetings. The publication of this journal had at once a favorable influence on the fortunes of the society. The numbers grew from 1000 to 2000, and the Society continued to make slow and steady progress, adding definitively about 30 new members a year to its total numbers. Twelve years ago, however, upon the resignation of Dr. Markham, a new editor was appointed, Mr. Ernest Hart, who was at that time co-editor of the *Lancet*, accepting the office of editor of the *British Medical Journal* on condition that he was allowed

considerably to increase the size of the *Journal* and to conduct it in a thoroughly energetic, and independent manner, in such a way as to make it worthy of being the weekly organ of a powerful Association. Under his direction the *Journal* was at once doubled in size. It was brought into a state of scientific and social activity, and made an organ of the most recent scientific and professional work, and its editorial departments conducted with vigor and literary skill. The effect upon the fortunes of the Association was magical. Five hundred new members joined that year, and for each successive year since that time, from five hundred to six hundred new members have been added to the list by the simple process of sending out throughout the country once or twice in the year copies of the *Journal* and forms of application for membership. The result has been that whereas for the thirty-six years that the Association had existed, it had only slowly crept up to about two thousand, it has, during the ten years that Mr. Ernest Hart has edited the *Journal*, risen in numbers until it now includes eight thousand members of the profession, and, according to the statements printed in the *Journal*, it circulates another fifteen hundred copies outside the profession. It gives forty pages of printed matter every week, so that the *Lancet* has felt itself called upon to enlarge the number of its pages in order to bring them up to its now formidable rival; but the *Journal*, by reason of the closeness of its type, still gives about one fourth more matter than its senior rival. The circulation of the *Journal* is now alleged to be some thousands more than that of the *Lancet*, and larger than that of any other medical paper in the world. Certainly the British Medical Association has in this way become the most powerful medical association in the world. The way in which the *Journal* has done this has been by converting all its subscribers into members of the Association, by a very simple process. When the extra numbers of the *Journal* are issued, which takes place at the beginning of every year, a circular which goes by post informs the person receiving it that the subscription of the Association, including the weekly supply, post free, of the *Journal*, of which a specimen copy has been sent by the same post, is five dollars per annum; but the subscription to the *Journal* alone to others than members of the Association is six-and-a-half dollars. Thus the *Journal* offers a bonus on membership in the British Medical Association.

From three to four hundred new members are thus added each January. Having thus created large nuclei of members in the various counties, the editor appoints a correspondent of the *Journal* in any part of the country in which no branch exists, and this correspondent presently makes it his business to arrange a local meeting of members and to form a branch of the Association. In this way, the number of branches which, when the *Journal* first took its new start under the editorship of Mr. Hart, was only ten, has risen now to twenty-seven. Branches have been formed, not only all over England, but throughout Scotland and Ireland; and new branches are being formed of members of the Association, who have emigrated to Australia and India and still desire, by the branch organization of the Association, to maintain close relationship with the profession in the mother country.

It is unnecessary to say anything in praise of the *British Medical Journal*. It has by far the largest circulation of any English medical journal, and its reputation is such as to make it independent of commendation on that subject. What is to the point is to refer to the balance-sheet, which is published every year and distributed at the annual meetings of the Association, as well as in the pages of the *Journal*. There it may be seen that the *Journal* becomes not only a powerful means of attracting new members to the Association, and of keeping them in it by maintaining their interest and connection with the Association and giving them "value for their money," but that its advertising columns contribute largely to increase the funds of the British Medical Association, bringing in an income of something like twenty-five thousand dollars a year. The total income of the British Medical Association is about seventy thousand dollars, of which twenty-five thousand are from advertisements in the paper, and the balance from subscriptions of members and sales of the *Journal*. Out of this income are defrayed the salary of the secretary—not a medical man but a business man—who acts as business manager of the *Journal* and general business secretary of the Association at a salary of twenty-five hundred dollars a year, giving his whole time to the work; also the rent of a building, centrally situated, which serves as the printing and publishing office for the *Journal*, and also as a gathering place for the committees of the Association throughout the year. There are, further, defrayed the expenses

of the various standing committees appointed for special purposes, such as, last year, "the promotion of legislation for habitual drunkards;" the standing committee for the examination of bills brought into parliament affecting medical interests, and for the promotion of clauses beneficial to medical interests or the opposing of provisions considered likely to be injurious to them; and other similar committees. There is a further payment out of funds of the Association for the promotion of researches in medicine and the collateral sciences. A thousand dollars were voted in this way to Professor Hughes Bennett and Professor Rutherford, of Edinburgh, for the expenses of their famous researches "On calomel and other agents having a reputation as promoting the flow of bile." In all, about fifteen hundred or two thousand dollars a year are voted in this way. Certain contributions are made towards expenses of the annual meeting, especially the printing expenditure, and, from time to time, special grants are made towards specially important medical objects. The editor of the *Journal* is paid about five thousand dollars a year, including payments for his editorial writing, and the sub-editors about twenty-five hundred dollars each. The literary expenses for payments to writers on the staff for editorial articles, reviews, criticisms, and the like, amount to about another five thousand dollars a year. After all expenses are paid, there remains now an annual surplus of from three thousand to five thousand dollars, which has been accumulated into a reserve fund.

If, then, we review the position of this powerful Association, we shall see that it has a formation which includes, first of all, a strong central executive; this is elective, mainly from its twenty-eight branches, who each send one delegate to the central council, generally the honorary secretary of the branch. This central council includes all past presidents, and twenty members elected at the annual meeting; and it meets once a quarter at least, or more often under special emergency. The central council is a powerful executive institution. It delegates the business conduct of the *Journal* to a "Journal and Finance Committee," which meets also once a quarter, occupies itself chiefly with passing accounts, and general questions of finance and business management, and communicates with the editor upon any subjects which may have arisen during the quarter. There are also a considerable number of standing committees,

appointed at the annual meeting, to consider special subjects, whose powers are strictly limited by the terms of reference, but who work throughout the year, and who derive their funds solely from special grants by the central executive committee. The standing "Committee on Parliamentary Bills" consists, like the Executive Council itself, of a representative of every branch and ten members appointed by the annual meeting, and is a most powerful protector of all medical interests. With this organization the Association possesses in the weekly *Journal* the means of keeping all its members in constant communication, one with another. The addresses given at the annual meeting by appointed orators in each subject, are at once printed in full in the *Journal*. Every paper read is printed in abstract, together with a report of the discussion excited by it. Thus, the Association secures for itself a full, rapid, and responsible report, which comes at once into the hands of all its members, and of all those in the profession, or out of it, who choose to subscribe to the *Journal*, week by week. Any subjects of discussion, which arise at the meeting, can be continued and are continued from week to week by communications in the *Journal*. Work arising out of the meeting is reported throughout the year in the *Journal*. The quarterly meetings of the executive committee, the proceedings of the standing committees, and of the branches, are all continuously brought to the knowledge of the members, and discussed by them in their weekly *Journal*. Fresh subjects of interest and of public moment, occurring throughout the year, are discussed, dealt with, and reopened for debate and final settlement at the annual meeting.

Not all the papers read at the annual meeting are published in full, but full discretion is given to the editor to publish or not, according to his estimate of the importance and interest of the papers to the members at large. The rule of the Association is that the interest of the individual must be subordinate to the common welfare, and although, no doubt, the discretion of the editor, in publishing in full, or in rejecting individual papers, may be often questioned by the individual, yet his action has from the first remained entirely unfettered; no instance of any abuse of that power is considered by any member to exist, and it has worked admirably for the general welfare in securing for the *Journal* the best of the papers read, and in making it understood that the *Journal* of the Association would never be allowed

to become a "waste basket" for inferior literature, but that a rigid power of selection would be exercised in respect to the publication of the full text of any papers offered for that purpose.

These details are of importance to the American Medical Association, for they include the germs of an organization peculiarly adapted to American ideas. It is essentially democratic, and entirely representative. It is dependent for its success on the intelligence, union, and good-will of the members. It is decentralizing, inasmuch as it tends to the formation or the strengthening everywhere of the local societies, which have thus throughout the year the means of making themselves heard in metropolitan centres, and of communicating with each other. Above all, it is a most successful and influential means of increasing the membership, enlarging the power, and widening the basis of the Association, and of making it a living organism during the intervals between the annual meetings. Finally, it has the great advantage of securing the largest amount of value to each and all of the members, for the smallest possible subscription. The *Journal* becomes, in fact, a co-operative enterprise in which *the profits resulting from their subscriptions go into their own pockets*, instead of those of any individual proprietor. *They own their own paper.* They are able to get the advantage of a powerful organization, and of a first class medical paper at the same annual subscription as that of a medical paper by itself, and with the surplus they find funds for a place of meeting for their committees, and for the promotion of public and scientific objects, and the creation of a reserve fund for future public uses. There seems no reason why an experiment so essentially accordant with American instincts and traditions, and one which has succeeded so well in England, should not have at least as great, if not a greater, success in America.

One point, however, that is specially worthy of note is, that the success of the *British Medical Journal* has been largely dependent upon the manner in which it has been conducted. The weekly *Journal* did little for the Association until it fell into the hands of an experienced editor, whose ability is so generally recognized that there is no need to dwell upon it, and to whom a large and unfettered responsibility is left, although he remains, of course, personally responsible to the executive of the Association for the right use of the power entrusted to him, as every

editor does to those who appoint him. It will be necessary to find for any organ which this Association may publish an editor of recognized position, whom the Association would accept as its worthy officer and representative in so responsible a post, a man of literary skill, scientific knowledge, and journalistic experience, or, at least, journalistic instincts and tact. He should be paid liberally, he should be treated with respect, and from him ought to be expected a serious determination to use the powers entrusted to him with courtesy and fairness, and with one sole object, the elevation of the standard of professional knowledge and interests, the maintenance of a high order of professional dignity and mutual courtesy. It is impossible to doubt that such a man can be found; possibly there may be many; and the question is one which appears to be well worthy of thorough examination by the council and members of this Association, because it seems tolerably certain that, if for the present bulky, tardy, little read, and unproductive volume of Transactions there could be substituted an active, vigorous weekly journal, read everywhere, and with a large income, such as would naturally come to it from its advertising sheet, there would be in such a change the earnest of a rapid and important growth in the numbers, influence, and usefulness of the American Medical Association.

